

Disclosure Report Cover

Amendment

☒ Yes ☐ No

Use this form for general report and committee information, must be signed and submitted along with other detailed forms.
Do not use this form to update information.

1. Committee Information			
a. Full Name <u>Elect Steve Taylor District 6 Goldsboro City Council</u>		c. ID Number	
b. Mailing Address (include City/State and Zip Code) <u>P.O. Box 10305 Goldsboro NC 27534</u>		d. Date Filed <u>12/21/2023</u>	
		e. Phone Number	
2. Report Year <u>2023</u>	3. Period Start Date (mm/dd/yy) <u>08/11/2023</u>	4. Period End Date (mm/dd/yy) <u>09/26/2023</u>	5. Treasurer Full Name <u>STEVEN DWIGHT TAYLOR</u>
6. Type of Committee (Check One) <input checked="" type="checkbox"/> Candidate Campaign <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Independent Expenditure <input type="checkbox"/> Joint Fundraiser <input type="checkbox"/> Legal Expense Fund		9. Type of Report (check only one type of report from one category) Municipal <input type="checkbox"/> Organizational <input checked="" type="checkbox"/> Thirty-five day <input type="checkbox"/> Pre-primary <input type="checkbox"/> Pre-election <input type="checkbox"/> Pre-runoff <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special State/County <input type="checkbox"/> Organizational <input type="checkbox"/> Quarterly <input type="checkbox"/> First <input type="checkbox"/> Second <input type="checkbox"/> Third <input type="checkbox"/> Fourth <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special Referendum <input type="checkbox"/> Organizational <input type="checkbox"/> Pre-referendum <input type="checkbox"/> Final <input type="checkbox"/> Supplemental Final <input type="checkbox"/> Annual <input type="checkbox"/> Special	
7. Type of Fund (if applicable, check one) <input type="checkbox"/> Booster Fund <input type="checkbox"/> Building Fund <input type="checkbox"/> Other:		10. Special Report Name	
8. Number of Fundraisers this Report			
11. Account Information		11. Account Information	
a. Financial Institution Full Name <u>Southern Bank</u>		a. Financial Institution Full Name <u>RECEIVED WCOB</u>	
b. Purpose <u>GENERAL OPERATIONAL ACCOUNT</u>	c. Account Code <u>7083</u>	b. Purpose	c. Account Code
	d. Period Begin Balance <u>\$ 3700.00</u>		d. Period Begin Balance <u>\$</u>
CERTIFICATION			
I certify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, 22B & 22D-22M of Chapter 163 of the NC General Statutes and that no funds are commingled with prohibited or other non-disclosed funds. I further certify that this report is complete, true and correct and that I have been trained by the NC State Board of Elections.			
<u>STEVEN D. TAYLOR</u> Printed Name of Signer		<u>Steven D. Taylor</u> Signature of Appointed Treasurer	
		<u>12/21/2023</u> Date	
FOR OFFICE USE ONLY			
Date Received: _____	Employee: _____	Delivery Method	
Date Postmarked: _____	Employee: _____	<input type="checkbox"/> Normal Mail	
Date Scanned: _____	Employee: _____	<input type="checkbox"/> Registered Mail	
Date Data Entered: _____	Employee: _____	<input type="checkbox"/> Hand Delivered	
		<input type="checkbox"/> Electronically Filed	
		<input type="checkbox"/> Signer has not received mandatory training	
Please Note: This form cannot be used to amend committee information such as the committee address, treasurer, assistant treasurer, custodian of books information, or account information. You must amend the Statement of Organization (CRO-2100A-E) to make committee changes.			

Detailed Summary

Amendment
☒ Yes ☐ No

Use this form to summarize all disclosure reporting forms and to total monetary information

1. Committee Full Name (and Fund if applicable) <i>Evan Stone Taylor District 6 Goldsboro City Council</i>		2. Type of Report <i>35 Day Report</i>		3. ID Number	
Start of Election Cycle: <i>January 1, 2023</i>		Total this Reporting Period		Total this Election Cycle	
4) Cash on Hand at Start		\$ <i>3700.00</i>		\$ <i>-0-</i>	
RECEIPTS					
5) Aggregated Contributions from Individuals (CRO-1205)		\$ <i>-0-</i>		\$ <i>50.00</i>	
6) Contributions from Individuals (CRO-1210)		\$ <i>1500.00</i>		\$ <i>5263.00</i>	
7) Contributions from Political Party Committees (CRO-1220)		\$ <i>-0-</i>		\$ <i>-0-</i>	
8) Contributions from Other Political Committees (CRO-1230)		\$ <i>-0-</i>		\$ <i>-0-</i>	
9) Loan Proceeds (CRO-1410)		\$ <i>-0-</i>		\$ <i>-0-</i>	
10) Refunds/Reimbursements to the Committee (CRO-1240)		\$ <i>-0-</i>		\$ <i>-0-</i>	
11) Other Receipt Sources					
11a) Interest on Bank Accounts (CRO-1250)		\$ <i>-0-</i>		\$ <i>0</i>	
11b) Contributions from Not-For-Profit Organizations (CRO-1250)		\$ <i>-0-</i>		\$ <i>0</i>	
11c) Outside Sources of Income (CRO-1250)		\$ <i>-0-</i>		\$ <i>0</i>	
11d) Legal Expense Fund - Other Sources (CRO-1270)		\$ <i>-0-</i>		\$ <i>0</i>	
11e) Exempt Purchase Price Sales (CRO-1265)		\$ <i>-0-</i>		\$ <i>0</i>	
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)		\$ <i>1500.00</i>		\$ <i>5313.00</i>	
EXPENDITURES					
13) Disbursements					
13a) Operating Expenditures (CRO-1310)		\$ <i>3191.86</i>		\$ <i>3191.86</i>	
13b) Contributions to Candidates/Political Committees (CRO-1310)		\$ <i>0</i>		\$ <i>0</i>	
13c) Coordinated Party Expenditures (CRO-1310)		\$ <i>0</i>		\$ <i>0</i>	
14) Aggregated Non-Media Expenditures (CRO-1315)		\$ <i>0</i>		\$ <i>0</i>	
15) Loan Repayments (CRO-1420)		\$ <i>0</i>		\$ <i>0</i>	
16) Refunds/Reimbursements from the Committee (CRO-1320)		\$ <i>0</i>		\$ <i>0</i>	
17) In-Kind Contributions (CRO-1510)		\$ <i>0</i>		\$ <i>113.00</i>	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ <i>3191.86</i>		\$ <i>3304.86</i>	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ <i>2008.14</i>		\$ <i>2008.14</i>	
ADDITIONAL INFORMATION					
20) Non-Monetary Gifts Given to Other Committees (CRO-1330)		\$ <i>-0-</i>			
21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430)		\$ <i>-0-</i>			
22) Debts and Obligations owed by the Committee (CRO-1610)		\$ <i>-0-</i>			
23) Debts and Obligations owed to the Committee (CRO-1620)		\$ <i>-0-</i>			
24) Account Transfers Within the Committee (CRO-1720)		\$ <i>-0-</i>			
25) Administrative Support (CRO-1710)		\$ <i>-0-</i>		\$ <i>-0-</i>	
26) Forgiven Loans (CRO-1440)		\$ <i>-0-</i>		\$ <i>-0-</i>	
27) 48-Hour Notice Reports Sum (CRO-2220)		\$ <i>-0-</i>		\$ <i>-0-</i>	
28) Contributions to be Refunded (CRO-1215)		\$ <i>-0-</i>		\$ <i>-0-</i>	

Contributions from Individuals

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Amendment

☒ Yes ☐ No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

ELIOT STEVE TAYLOR Dist. 46 GOLDSBORO CITY (unc)

a. Full Name, Mailing Address & Phone
(include city, state, & zip)

Ester Ivy Nagypal
141 Arrington Bridge Road
Goldsboro NC 27530-7231

b. Job Title/Profession

OWNER

c. Employer's Name/Specific Field

Heritage Farms
Premium B/K, LLC

d. Comments

e. Election Sum to Date
\$ 500.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	7083	CHECK		08/01/2023	\$ 500.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

a. Full Name, Mailing Address & Phone
(include city, state, & zip)

Muiron Best Jr.
809 Mill Road
Goldsboro NC 27534

b. Job Title/Profession

DEVELOPER

c. Employer's Name/Specific Field

M. Best & Sons, LLC

d. Comments

e. Election Sum to Date
\$ 500.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	7083	CHECK		8/22/2023	\$ 500.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

a. Full Name, Mailing Address & Phone
(include city, state, & zip)

Donald Best Barnes II
619 Park Avenue
Goldsboro NC 27530

b. Job Title/Profession

Food Manufacturer

c. Employer's Name/Specific Field

ALTA FOODS

d. Comments

e. Election Sum to Date
\$ 500.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	7083	CHECK		09/12/2023	\$ 500.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$

\$ 1500.00

\$ 1500.00

Disbursements

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Amendment
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

Use this form to report expenditures from the committee for operating expenses, contributions to candidate/political committees and coordinated party expenditures

ELECT STEVE TAYLOR DISTRICT 6 GOLDSBORO CITY COUNCIL					
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures					
a. Full Name, Mailing Address & Phone (include city, state, & zip) Signs From The Farm, Inc. 373 Vann-Sm:TL Road Seven Springs NC 28578			b. Coordinated Committee Name c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		d. Comments e. Election Sum to Date \$ 1932.18
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
7083	CHECK		08/14/2023	\$ 1000.00	Signs / Cards
7083	CHECK		08/28/2023	\$ 932.18	Signs / Cards
a. Full Name, Mailing Address & Phone (include city, state, & zip) The Buz A Publication of Media Publishing LLC 122 S. Berkley Blvd, Ste. 3 Goldsboro NC 27534			b. Coordinated Committee Name c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		d. Comments e. Election Sum to Date \$ 150.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
7083	CHECK		08/24/2023	\$ 120.00	Political Ad.
7083	CHECK		09/21/2023	\$ 30.00	Political Ad.
a. Full Name, Mailing Address & Phone (include city, state, & zip) Goldsboro Builders Supply 701 Pate town Road PO Drawer E Goldsboro NC 27533			b. Coordinated Committee Name c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		d. Comments e. Election Sum to Date \$ 223.81
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
7083	CHECK		09/05/2023	\$ 223.81	Sign Framing Materials
Total on this page					\$ 2305.99
(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses) (This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm) (This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)					\$ 2305.99
A* - Media B* - Printing C* - Fundraising D - To Another Candidate E - Salaries F* - Equipment G - Political Party H* - Holding Public Office Expenses I - Postage J - Penalties K* - Office Expenses Q* - Donation to Legal Expense Fund O* Other					

Disbursements

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Amendment
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

Use this form to report expenditures from the committee for operating expenses, contributions to candidate/political committees and coordinated party expenditures

ELECT STEVE TAYLOR DISTRICT 6 GOLDSBORO, NC						
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures						
a. Full Name, Mailing Address & Phone (include city, state, & zip) New Old North Wayne Walk Publication 1403 East Mulberry Street Goldsboro NC 27530				b. Coordinated Committee Name c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		d. Comments e. Election Sum to Date \$ 200.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
7083	CHECK		09/12/2023	\$ 200.00	CAMPAIGN AD	
				\$		
a. Full Name, Mailing Address & Phone (include city, state, & zip) SW Promotions 601 - A North James Street Goldsboro NC 27530				b. Coordinated Committee Name c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		d. Comments e. Election Sum to Date \$ 173.47
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
7083	CHECK		09/21/2023	\$ 173.47	CAMPAIGN T-SHIRTS	
				\$		
a. Full Name, Mailing Address & Phone (include city, state, & zip) Allu Copy 322 North John Street Goldsboro NC 27530				b. Coordinated Committee Name c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		d. Comments e. Election Sum to Date \$ 512.40
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
7083	CHECK		09/26/2023	\$ 512.40		
				\$		
Total Operating Expenses (This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)					\$ 885.87	
Total Contributions to Candidates/Political Committees (This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)					\$ 3191.86	
Total Coordinated Party Expenditures (This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)						
Legend: A* - Media B* - Printing C* - Fundraising D - To Another Candidate E - Salaries F* - Equipment G - Political Party H* - Holding Public Office Expenses I - Postage J - Penalties K* - Office Expenses Q* - Donation to Legal Expense Fund O* Other						
Provide a detailed explanation in required remarks field (k)						